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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

	Application Number	10/677,131	
	Filing Date	September 30, 2003	
	First Named Inventor	Balint, Robert F.	
	Art Unit	1639	
	Examiner Name	Teresa D. Wessendorf	
Total Number of Pages in This Submission	6	Attorney Docket Number	021167-001100US

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form- PTO/SB/17 in duplicate <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Jean M. Lockyer, Ph.D.		
Date	August 20, 2007	Reg. No.	44,879

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Malinda C. Dagit	Date	20 Aug. 2007





Effective on 12/08/2004.
Fees subject to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2007

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180)

Complete if Known	
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Examiner Name	Teresa D. Wessendorf
Art Unit	1639
Attorney Docket No.	021167-001100US

METHOD OF PAYMENT (check all that apply)

- Check Credit Card Money Order None Other (please identify): _____
- Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Small Entity

Fee (\$) 50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

Multiple Dependent Claims

Fee (\$) Fee Paid (\$)

-20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

-3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	- 100 = _____	/ 50 = _____ (round up to a whole number)	x _____	= _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Submission of Information Disclosure Stmt

Fees Paid (\$)

180

SUBMITTED BY

Signature	Registration No. (Attorney/Agent)	Telephone 415-576-0200
Name (Print/Type) Jean M. Lockyer	44,879	Date August 20, 2007

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

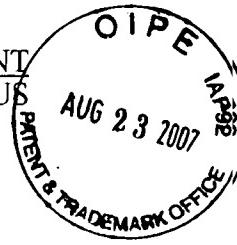
Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

On 20 Aug. 2007

TOWNSEND and TOWNSEND and CREW LLP

By: Malinda Adajst

PATENT
Attorney Docket No.: 021167-001100US



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Robert F. BALINT and Jeng-Horng HER

Application No.: 10/677,131

Filed: September 30, 2003

For: METHODS FOR AFFINITY
MATURATION

Confirmation No.: 3895

Examiner: Teresa D. Wessendorf

Art Unit: 1639

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER
37 CFR §1.97 and §1.98

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A&B are being called to the attention of the Examiner. In compliance with the requirements of 37 CFR §1.98(a)(2), copies of U.S. references B1-B2 are not enclosed. In accordance with 37 CFR §1.98(d), a copy of reference B3 can be found in Application No. 10/208,730, filed July 29, 2002, (Attorney Docket No. 021167-000330US).

The B1 and B2 references were cited during prosecution of parent Application No. 10/208,730 (Office Action dated December 28, 2005). Reference B3 was cited in a Supplementary European Search Report that issued in an EP case corresponding to parent

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application serial no. 10/208,730. Applicant understands the Examiner can access papers from the prosecution of the cited cases electronically via PALM. However, if the Examiner has difficulty obtaining papers from that source he or she are invited to call the undersigned who will be happy to supply them.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR §1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed on or before payment of the issue fee.

Please charge the IDS fee of \$180 to Deposit Account No. 20-1430 in accordance with the accompanying Fee Transmittal PTO/SB/17. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,
Jean M. Lockyer, Ph.D.
Reg. No. 44,879

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61123416 v1



Substitute for form 1449A&B/PTO				Complete if Known	
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				<i>Examiner Name</i>	Teresa D. Wessendorf
Sheet	1	of	1	<i>Attorney Docket Number</i>	021167-001100US

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (<i>if known</i>)			
	B1	US-5,503,977 A	04-02-1996	JOHNSON, Nils and VARSHAVSKY, Alexander	
	B2	US-2003-0054413 A1	03-20-2003	KUMARASWAMY, Sriram, et al.	

FOREIGN PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Country Code ³ Number ⁴ Kind Code ⁵ (<i>if known</i>)			
	B3	WEHRMAN, Tom, et al.; "Protein-protein interactions monitored in mammalian cells via complementation of β -lactamase enzyme fragments;" <u>PNAS</u> ; March 19, 2002; pp. 3469-3474; 99:6.			<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			T ²
	B3	WEHRMAN, Tom, et al.; "Protein-protein interactions monitored in mammalian cells via complementation of β -lactamase enzyme fragments;" <u>PNAS</u> ; March 19, 2002; pp. 3469-3474; 99:6.			<input type="checkbox"/>

Examiner Signature	Date Considered
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¹ EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

² Applicant's unique citation designation number (optional). ³ Applicant is to place a check mark here if English language Translation is attached.